UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	01306.000119				
First Name	d Inventor or Application Identifier				
	HIROSHI SAHARA				

			E	xpress Mail	Label No.				
	PPLICATION ELEME 00 concerning utility patent		s.	ADDR	ESS TO:	Co P.	ommiss O. Box	Patent Applicationsioner for Patents 1450 a, VA 22313-1450	
1. X Fee Transn (Submit an o	mittal Form original, and a duplicate for fee p	processing)		7.	CD-ROM o		luplicate	e, large table or C	omputer
2. Applicant c See 37 CFI	laims small entity status. R 1.27.			8.		and/or Ami le, all neces		d Sequence Subm	
3. X Specification	on <i>Total P</i>	ages 28			a	Computer R	Readabl	le Form (CRF)	69066
4. X Drawing(s) 5. Oath or De	(35 USC 113) Total S				i	cation Seque CD-ROM o paper		sting on: (2 copies); or	10/6
a N	Newly executed (original or	сору)			c \$	Statements	verifyin	ng identity of abov	e copies
					ACCOM	PANYING.	APPLIC	CATION PARTS	
	Copy from a prior applicatio for continuation/divisional wi	` ' ' '	·	9.	Assignment	Papers (cov	er shee	t & document(s))	
·i.	i. DELETION OF INVENTOR(S) Signed Statement attached deleting			10.		3(b) Stateme e <i>is an assi</i> į		Power	of Attomey
	_	in the prior application	, see	11.	English Tra	anslation Do	ocumen	nt (if applicable)	
6. X Application	Data Sheet. See 37 CFR	1.76		12.		Disclosure (IDS)/PTO-		Copies Citatio	s of IDS ns
				13.		Amendme			
				14. X		ceipt Postca specifically			
				15.	(if foreign p	opy of Priori priority is cla		ument(s)	
				16	Other:		V. 18.		
17. If a CONTINUINO	G APPLICATION, check ap	ppropriate box and s	upply t	he requisite	information:	_		·	
Continuation Divisional Continuation-in-part (CIP) of prior application No/ Prior application information: Examiner Group/Art Unit:									
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
	18. CORRESPONDENCE ADDRESS								
X Customer Num	X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below						below		
NAME									
						_			
Address									
City	-	State				Zip Code			
Country	<u> </u>	Telephone	l			Fax		Ī	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	31 -20 =	11	X \$ 18.00 =	\$198.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 -3 =	0	X \$ 86.00 =	\$ 0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$290.00 =				\$290.00
				BASIC FEE (37 CFR 1.16(a))	\$770.00
			Total of	above Calculations =	\$1258.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL =	\$1258.00
9. Sn a.	_	ntity statement is enclose			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	Lawrence A. Stahl, Reg. No. 30,110				
SIGNATURE	Mall				
DATE	October 23, 2003				

Fees required under 37 CFR 1.17.

Fees required under 37 CFR 1.18.

LAS/lip

Form #125

b.

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